

INSTRUCTIONS FOR COMPLETING AN APPLICATION FOR  
CERTIFICATION OF FIRMS (ADM 275)

UNDERGROUND STORAGE TANK CERTIFICATION PROGRAM

All firms which intend to perform services on underground storage tank systems (USTs) which are regulated pursuant to P.L. 1986, c. 102, must be certified by the Department of Environmental Protection (DEP). In order for a firm to become certified, the owner, a partner (in case of a partnership), or one or more officers (in case of a corporation) must be certified. An officer is defined in N.J.S.A. 14A:6-15 as "The officers of a corporation shall consist of a president, a secretary, a treasurer and, if desired, a chairman of the board, one or more vice presidents and such other officers as may be prescribed in the by-laws". A firm may only become certified for the activities (classifications) these individuals are certified to perform. In addition, a firm must have a minimum of \$250,000 of financial responsibility for the cleanup & mitigation of a discharge of hazardous substances as a result of the performance of a certified activity. A firm must display a certificate at each business office.

An application fee of \$35 per classification of certification must accompany this application unless the individual certifying the firm is a Professional Engineer or Plumbing Contractor. Additional certificates as indicated in section 4 require a \$10 fee for each certificate.

NOTE: No employee of the firm shall perform a service (even if he/she is certified in that classification) unless the firm is also certified in that classification.

Additional information on the UST certification program is contained in the Interim Procedures Document available from the DEP.

FILL OUT THE APPLICATION FORM COMPLETELY

ATTACH ADDITIONAL INFORMATION AS NEEDED

SECTION 1 - Type or legibly print the name and address of the main office of the firm, the Federal I.D. number of the firm and the activities the firm performs. Check the box(es) indicating the classification(s) the firm is to be certified for.

SECTION 2 - Type or legibly print the name, certification number, certification category and title of the owner, partner(s) or officer(s) who is/are being used to certify the firm. Attach additional sheets, if necessary.

SECTION 3 - Type or legibly print the type of financial assurance retained by the firm. This may be in the form of insurance, surety bond, letter of credit, self insurance or security posted with the DEP. If insurance is used, indicate the carrier, policy number, amount of coverage and the date of expiration. If another method is used, attach documentation explaining the coverage.

SECTION 4 - Type or legibly print the name and address of other offices which require the posting of a certification placard. Attach additional sheets, if necessary. A \$10 fee is required for each additional office.

SECTION 5 - After completing the application, the applicant must sign the form and have the form notarized by a notary public or lawyer. The form should be submitted, with the applicable fees, to the Bureau of Revenue at the address indicated on the form.

ADM-275  
9/97

NJ DEPARTMENT OF ENVIRONMENTAL PROTECTION  
Bureau of Revenue  
PO BOX 417, Trenton NJ 08625-0417

APPLICATION FOR CERTIFICATION OF FIRMS  
UNDER THE PROVISIONS OF P.L. 1991, C 123  
UNDERGROUND STORAGE TANK CERTIFICATION PROGRAM

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Section 1

FIRM NAME \_\_\_\_\_ FEDERAL ID # \_\_\_\_\_

FIRM ADDRESS \_\_\_\_\_

PRIMARY TYPE OF BUSINESS \_\_\_\_\_

TYPES OF CERTIFICATION CLASSIFICATION REQUESTED:

INSTALLATION (Check one only)

☐ Entire UST System ☐ Release Detection Monitoring System Only

CORROSION PROTECTION SYSTEMS ANALYST (Check one only)

☐ Cathodic Protection Specialist ☐ Cathodic Protection Tester Only

CLOSURE ☐ TANK TESTING ☐ SUBSURFACE EVALUATION ☐

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Section 2

CERTIFIED OWNER/PARTNER/OFFICER(S): (Use additional sheets if necessary)

NAME \_\_\_\_\_ CORPORATE TITLE \_\_\_\_\_

UST CERTIFICATION # \_\_\_\_\_ CLASSIFICATIONS \_\_\_\_\_

I am a Licensed Professional Engineer YES ☐ NO ☐ LIC # \_\_\_\_\_

I am a licensed Plumbing Contractor YES ☐ NO ☐ LIC # \_\_\_\_\_

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Section 3

FINANCIAL ASSURANCE MECHANISM \_\_\_\_\_

CARRIER \_\_\_\_\_ POLICY # \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_ POLICY LIMITS \_\_\_\_\_

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Section 4

ADDITIONAL BUSINESS OFFICES IN NJ WHICH MUST DISPLAY A CERTIFICATE:

NAME	ADDRESS
_____	_____
_____	_____
_____	_____

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Section 5

I certify, under penalty of law, that the information provided in this document is true, accurate and complete; and that all certifications, policies and mechanisms are currently in effect. I am aware that there are significant civil and criminal penalties for submitting false, inaccurate or incomplete information, including fines and/or imprisonment.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

TITLE \_\_\_\_\_

SWORN TO AND SUBSCRIBED BEFORE ME

on this \_\_\_\_\_ date of \_\_\_\_\_ 19 \_\_\_\_

NOTARY \_\_\_\_\_

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IMPORTANT: Read carefully before submitting your application

- Have you answered all the questions?
- Has the application been signed, dated & notarized?
- Is a check made payable to TREASURER, STATE OF NEW JERSEY, included with the application?

PLEASE SEND TO

NJ Department of Environmental Protection  
Bureau of Revenue  
PO Box 417  
Trenton NJ 08625-0417

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